

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

David Michael Smith
 Maynard, Cooper & Gale, P.C.
 1901 Sixth Avenue North
 2400 AmSouth/Harbert Plaza
 Birmingham, AL 35203-2618

A. Signature

X
 Agent
 Addressee

B. Received by (Printed Name)

T. Davis

C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

06 CW 946 #43

3. Service Type

 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes

2. Article Number

(Transfer from service label)

7007 1490 0000 0024 9599

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Robin Ann Adams
 Maynard, Cooper & Gale, P.C.
 1901 Sixth Avenue North
 2400 AmSouth/Harbert Plaza
 Birmingham, AL 35203-2618

A. Signature

X
 Agent
 Addressee

B. Received by (Printed Name)

T. Davis

C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

06 CW 946 #43

3. Service Type

 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes

2. Article Number

(Transfer from service label)

7007 1490 0000 0024 9605

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540